

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2008 8:00 am
Secretary of State

02-08-2008 90032 012 ****61.25

DOCUMENT # 741254

1. Entity Name

THE JEWISH FEDERATION OF VOLUSIA AND FLAGLER
COUNTIES INC.



Principal Place of Business

470 ANDALUSIA AVE
ORMOND BEACH FL 32174
US

Mailing Address

470 ANDALUSIA AVE
ORMOND BEACH FL 32174
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1774958

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MICHAEL FURMAN
12 BROADWATER RD.
ORMOND BEACH FL 32174

7. Name and Address of New Registered Agent

Name

Lynne G. Ritter

Street Address (P.O. Box Number is Not Acceptable)

24 Iroquois Trail

City

Ormond Beach

FL

Zip Code

32174

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Lynne G. Ritter

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature and address when reinstating)

DATE

1/30/08

FILE NOW - FEE IS \$61.25

Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	GLICKSTEIN, GERALD	
STREET ADDRESS	753 MARINA POINT DRIVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	PE	☐ Delete
NAME	RITTER, LYNNE	
STREET ADDRESS	24 IROQUOIS TRAIL	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE	SD	☐ Delete
NAME	KOHN, MARIAN	
STREET ADDRESS	74 OAKMONT CR	
CITY-ST-ZIP	ORMONG CR 32174	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	President	☒ Change ☐ Addition
NAME	Ritter, Lynne G	
STREET ADDRESS	24 Iroquois Trail	
CITY-ST-ZIP	Ormond Beach, FL 32174	
TITLE	President Elect	☒ Change ☐ Addition
NAME	Kohn, Marian	
STREET ADDRESS	568 Riverside Drive	
CITY-ST-ZIP	Ormond Beach FL 32174	
TITLE	Asst. Sec	☐ Change ☒ Addition
NAME	Abel, Susan	
STREET ADDRESS	6 Creek Bend Way	
CITY-ST-ZIP	Ormond Beach, FL 32174-1807	
TITLE	Vice President	☐ Change ☒ Addition
NAME	Rab, Ellen	
STREET ADDRESS	10000 S. Highway 1A	
CITY-ST-ZIP	Ormond Beach, FL 32174	
TITLE	Treasurer	☐ Change ☒ Addition
NAME	Blum, Richard	
STREET ADDRESS	11 Shadow Creek Way	
CITY-ST-ZIP	Ormond Beach, FL 32174-6766	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gloria May Gloria MAY

1/30/08

386 672-0294